McChord Officers' Spouses' Club McChord AFB, Washington Cash Disbursement Voucher



Please fill this form out completely, attach all receipts, and sign before submitting.

Submitted By	Date						
Type of Disbursement and Amount Requested							
Reimbursement \$	Welfare \$	Advance \$					
Reason for Disburser	ment (Include item description(s), attac	ch all receipts)					
Account(s) Charged	(Please write the amount for each cate	gory on the line):					
SOCIAL:	_	Board Mtgs: Meals & Beverages					
	Activities Coffee	Programs/Social					
	Childcare	Publicity/Historian					
	Gifts: Board Members	President's Fund					
	Gifts: Honorary/Advisors	Sunshine					
	Gifts: President	Supplies					
	Mailing	Telephone					
	Membership & Roster	Ways & Means					
	Newsletter	Welcome/Farewell Members					
	Nominating	OTHER					
WELFARE:							
	· ·	OSMA Dinner Expenses					
	· ·	Auction: Catalog					
		Auction: Supplies					
		OSMA Expenses					
	OSMA Scholarship (Recipient N	Name)					
Check Payable to (if o	other than submitter)						
Address (if check is to	be mailed)						
(6.1.661.16 1.6							
Signature of Submitt	er						
(Da mat	in line For Transverse Has Only)						

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Date Paid	Check #	Amount Paid	CD Voucher #	Cash or Receipt Amount Returned (Advances Only)	Date Returned (Advances Only)	Initials
		\$		\$		